

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT?

☐ Yes

No

(CFA-4)

Summary Sheet

FILE NUMBER
TOTAL PAGES IN ENTIRE CFA-4 REPORT
3

COMMITTEE INFORMATION				
1. Full Name of Committee (as on Statement of Organization)	ime :			
Celestino-Horseman for Judge	7 0	was Talenh	one Number	
2. Acronym or Abbreviated Name (If any)	3. Commi (317	παε Τειέρη) 201	-0391	
NI/A	eck if this i	s a new add	tress	
4. Mailing Address (address where all campaign finance correspondence is received)				
525 Stevens St.	6. Party /	Affiliation (if	applicable)	
5. City, State, ZIP Code	Democra	t		
Indianapolis, IN 46203 CANDIDATE INFORMATION (For Candidate's Co	ommitted	s Only)	_	
·	8. Party	Affiliation or	If Independer	nt Candidate
7. Full Name of Candidate (include any nickname)				
Karen Celestino-Horseman	10. Cour	ity of Resid	ence	
9. Office Sought (Include district number, if any, Not required for exploratory committee.)	Marion .			
Superior Court Judge TYPE OF REPORT			CONVENTIO	N CANDIDATES ONLY
(IFEO) NEI OII.	_		Check one:	
11. Check one;			Pre-Con	vention
Pre-Primary Pre-Election Annual Nomination Other Final/Dishands Committee (lines 18, 19, and 20 must be '0') Outgoing Treasurer (within 10 days amond Statement of	f Grganization)		Post-Co	nvention
		COL	А ИМЏ	COLUMN B
12. Reporting Period: Through: Dec. 31, 2015		This	Period	Year to Date
		\$3,492	.84	
13. Cash on hand and investments at the beginning of this reporting period.				
14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	_			
15a, Itemized (use Schedule A)		-0-		-0-
15b, Unitemized		-0-		-0-
15c. Add lines 15a and 15b in both columns SUB	TOTAL_	-0-		<u>-0-</u>
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	-0	4	-0-
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				\$2,402.84
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		\$2,402	2.84	· ·
47h 1 lultomized		-0-		-0- \$2,402.84
17c, Add lines 17a and 17b in both columns	BTOTAL	\$2,402		
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	\$1,090	3.00	\$1,090.00
19. Debts OWED BY the committee (use Schedule D)		-0-		
20. Debts OWED TO the committee (use Schedule E)		-0		
ZU. Deuts Office To the Committee (FOR OFFICE USE ONLY

CERTIFICATION

1 CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. Title

Signature of Treasurer Treasurer

WARDUNIC- AN Information contrined in this report may not be copied for sale or used for any completcial purpose. (IC 3-9-4-9) A person who knowingly IR e.c. e.i.v.e.d. Till mexid a n. 20, s. 20 1 6y. 11:56 AM/INO. 86936 fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemaanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

Indiana Election Commission (IC 3-9-5-14)

State Form 4606 (R13/11-05)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side,

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IS THIS AN AMENDMENT? Yes

(CFA-4) **Summary Sheet**

FILE NUMBER **TOTAL PAGES IN ENTIRE CFA-4 REPORT**

COMMITTEE INFORMAT	ION			
1. Full Name of Committee (as on Statement of Organization)	enten wen	-,-		
Celestino-Horseman for Judge				
Acronym or Abbreviated Name (if any) N/A		ommittee Tele	phone Numb 01-0391	per
4. Mailing Address (address where all campaign finance correspondence is received)	Check if	this is a new a		
525 Stevens St.				•
5. City, State, ZIP Code	6. Pa	rty Affiliation (If applicable)
Indianapolls, IN 46203	Dem			
CANDIDATE INFORMATION (For Candidat	e's Commi	tees Only)		
7. Full Name of Candidate (include any nickname)			or if independ	dent Candidate
Karen Celestino-Horseman				
9. Office Sought (Include district number, if any, Not required for exploratory committee.) 10. C	ounty of Resid	dence	·
Superior Court Judge	Mario			
TYPE OF REPORT	INIQ(II)		CONVENT	ION CANDIDATES ONLY
11. Check one:			Check one:	
Pre-Primary Pre-Election Annual Nomination Other				nvention
Final/Disbands Committee (ilnes 18, 19, and 20 must be 10) Outgoing Treasurer (within 10 days emend State	ement of Organizat	ion)		onvention
12. Reporting Pariod;		COI.	UMN A	COLUMN B
From: Jan. 1. 2015 Through: Dec. 31, 2015			Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		\$3,492	.84	
14. Cash on hand and investments January 1, current year.				
CONTRIBUTIONS AND RECEIPTS				
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.,	<u> </u>			
15a. Itemized (use Schedule A)		-0-		- 0-
15b. Uniternized		-0-		-0-
	BUBTOTAL	-0-		-0-
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	-0-		-0-
EXPENDITURES				
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (use Schedule B) (Public Question; use Schedule C)		\$2,402.	84	\$2,402.84
17b. Uniternized		-0-		-O -
	SUBTOTAL	\$2,402.	84	\$2,402.84
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both calumns)	TOTAL	\$1,090.		\$1,090.00
19. Debts OWED BY the committee (use Schedule D)		-0-		Ψ1,000.00
20. Debts OWED TO the committee (use Schedule E)		-0-	· · · · · · · · · · · · · · · · · · ·	
				e e e e e e e e e e e e e e e e e e e
CERTIFY THAT (HAVE EVAMINED THIS STATEMENT TO THE BEAT OF ANY AND THE STATEMENT TO THE STA			(a)	FOR OFFICE USE ONLY
CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF I	TIS TRUE, COR	RECT AND COM	APLETE.	- our

	CERTIFICATION
	I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.
1	Date Date
J	Markey Thomas Solution (reasurer)

Signature of Candidate (f applicable)

WARNING: Any information contained in this report may not be copied for sale or used for any complexial purpose. (IC 3-9.4-9) A person who falls to file a complete or accurate report as required by the Indiana Carr R e c e i v e d T i m e 1th J a n. 20. iis 2016io 11:58 AM4/No. 8695 subject to civil penelties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to Individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be Itemized on this schedule.

	FILE	UMBI	ER
Page _	2	_ of	3

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	TEARY O-DATE	- 10 D 4 E
Code Karen Celastino-Horseman		☐ Direct ☐ In-Kind ☐ Payment of Debt . ☐ Returned Contribution	\$200.00	\$200.00	03/02/15
One North Pennsylvania, Suite 220		Other			
Indianapolis. IN 46204	·	Purposa:Relmb. for denation to Eddig (Barnes) for indy			02/02/15
Code C Karon Celestino-Homeman One North Pennsylvania, Suite 220 Indianapolis, IN 46204		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Reimb, for donation to(Frank) Mascari for District	\$200.00	\$200.00	03/02/15
Code Karen Celestino-Horseman One North Pennsylvania, Suite 220Indianapolis, IN 46204		21 Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Relimb. for donation to Donnelly for Indiana	\$250.00	\$250.00	05/29/15
Code C Raren Celestino-Horseman One North Ponnsylvania, Suite 220 Indianapolis, IN 46204		Direct In-Kind Peyment of Debt. Returned Contribution Other Purpose: Fundroiser for Jon Easter for City-County Council	\$343.00	\$343.00	07/22/15
Code C Karen Celestino-Horsoman One North Pennsylvania, Suite 220 Thoransylvania, IN 48204		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Reimh, for expenses for IDEA	\$59.84	\$59.84	08/23/15
Code C Raren Celestino-Horseman One North Pennsylvania, Suite 220 Indianapolis, IN 46204		Direct In-Kind Payment of Dobt Returned Contribution Other Purpose:Return. for donation to (Tom) Hannify 8DVP	\$100.00	\$100.00	08/31/15
Code <u>C</u> Karen Ceizetiho-Horseman One North Pennsylvania, Suite 220 Indianapolis, IN 46204		Payment of Debt Returned Contribution Other Purpose:Reimb, for donation	\$250.00	\$250.00	11/05/15
·		to Indianapolis Humani Society			
	SUBTOTAL THIS P	AGE OF SCHEDULE	\$1,402.84		
TOTAL OF ALL	PAGES OF SCHEDULE B ON T (Enter total on ITEM 17a	THE LAST PAGE ONLY	\$2,402.84		
Received Time Jan. 20, 201	6 12:02PM No. 8697	J. LITE GUILLINGLY SHEEL	<u> </u>		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expanses paid to individuals, businesses, labor organizations and other entities OVER \$100 per section, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, repartless of amount paid to political committees, (such as transfers out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

ı	FILE	≬UMB ì	≣R	
		_		
Page _	3	of	3	

RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE	COLUMN A	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
(street, number, city, state, Z/P code)	OFFICE SOUGHT (if applicable)	PURPOSE (he specific)	PERIOD	YEAR-TO-DATE	
Code	·	Direct In-Kind Paymoni of Debt Relumed Contribution Other Purpose: Indiana House Demogratic Caucus	\$50.00	\$50.00	12/21/15
Code C Karen Celestino-Horseman One North Pennsylvania, Suite 220		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Indiana Democratic Party Holiday Party	\$75.00	\$75.00	12/11/15
Indianapolis, IN 46204 CodeC Keren Celestino-Horseman One North Pennsylvania, Suite 220 Indianapolis, IN 46204		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Rolmh. for Indiana Democratic Party	\$125.00	\$125.00	04/10/15
Code		Jafferson/Jackson Direct In-Mnd Payment of Dabt Returned Contribution Other Purpose: Raimb, donation for Indianapolis Humana Society	\$500.00	\$500.00	05/01/15
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Reimb, donallon to	\$250.00	\$250.00	07/21/15
Code_C		Direct In-Kind Payment of Dobt Returned Contribution Other Purpose:			-
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
		AGE OF SCHEDULE			
Received Timedan. 20. —201	PAGES OF SCHEDULE B ON	THE LAST PAGE ONL) of the Summary Sheet	\$2,402.84		